

CHESHIRE EAST COUNCIL

Minutes of a meeting of the **Health and Wellbeing Scrutiny Committee**
held on Thursday, 13th March, 2014 at Committee Suite 1,2 & 3, Westfields,
Middlewich Road, Sandbach CW11 1HZ

PRESENT

Councillor H Gaddum (Chairman)

Councillors R Domleo, I Faseyi, D Hough, W Livesley, J Saunders, O Hunter
and M Sherratt

Apologies

Councillors L Jeuda, A Moran and M J Weatherill

ALSO PRESENT

Councillor J Clowes – Cabinet Member for Health and Adult Social Care
Jo Vitta – South Cheshire Clinical Commissioning Group
Matthew Cunningham – Eastern Cheshire Clinical Commissioning Group
Sam Nicol – Eastern Cheshire Clinical Commissioning Group

OFFICERS PRESENT

Lorraine Butcher – Strategic Director of Commissioning
Guy Kilminster – Head of Health Improvement
James Morley – Scrutiny Officer

185 **MINUTES OF PREVIOUS MEETING**

RESOLVED – That the minutes of the meeting held on 13 February 2014 be
approved as a correct record and signed by the Chairman.

186 **DECLARATIONS OF INTEREST**

There were no declarations of interest

187 **DECLARATION OF PARTY WHIP**

There were no declarations of Party Whip

188 **PUBLIC SPEAKING TIME/OPEN SESSION**

Mr Stefan Pyra, representing South Cheshire Patient Participation Group (SCPPG), informed the Group about an issue that had been raised regarding prescribing exercise as a form of treatment. SCPPG had received complaints that patients in Alsager were no longer able to receive subsidised access to leisure services at the local leisure centre through prescriptions from their GP. Funding for exercise on prescription had previously been provided by the Primary Care

Trust (PCT) and SCPPG believed that the funding was a Council function and suggested that the funding should be reinstated as the exercise programme was useful in reducing the effects of a variety of conditions and therefore reduced visits to hospital or accident and emergency services.

The Chairman asked the Cabinet Member for Health and Adult Services if she was able to address the questions raised by Mr Pyra. The Cabinet Member explained that as the subsidised exercise programme was prescribed by GPs for therapeutic purposes it was not the responsibility of the Council or Public Health to fund such an initiative. There seemed to have been an oversight during the transition from the PCT which resulted in the lack of funding. There was currently a pilot scheme taking place in Crewe which was hoped would provide evidence to GPs and the CCGs that providing funding to allow exercise on prescription was worthwhile by providing long term health benefits. The Cabinet Member also clarified that this issue did not impact on exercise as part of cardiac rehabilitation which was separate from exercise on prescription.

The Committee suggested that the Council needed to ensure there was better communication with the public on matters such as these. It was also suggested that the Council should encourage the CCGs to commission exercise programmes for patients, whilst ensuring that adequate services were available in Council leisure centres to do so.

189 **CARING TOGETHER: THE CASE FOR CHANGE**

Sam Nicol, Programme Director for Caring Together, gave a presentation about Eastern Cheshire CCG's Caring Together Programme. The aim of the Caring Together Programme was to design the most effective system for sustainable quality care.

To design a new system to meet the challenges in providing health and social care services to the community, Eastern Cheshire CCG wanted to engage patients, public and other stakeholders. This was because the CCG wished to design the system around the people involved and their needs. The CCG sought the Committee's assistance in promoting the Caring Together initiative to the Eastern Cheshire community and encourage people to contribute to the consultation.

The results of the consultation would be available in May 2014. It was suggested that they be presented to the Committee with viable options for the new system to allow the Committee to comment and make recommendations about the preferred option.

RESOLVED – That Eastern Cheshire CCG be requested to provide a report on the result of the Caring Together case for change consultation and the options for service development at the Committee's meeting in May.

190 **UPDATES FROM CCGS AND NHS ENGLAND**

Jo Vitta, South Cheshire Clinical Commissioning Group (CCG), and Matthew Cunningham, Eastern Cheshire CCG, provided brief updates on the progress made by the CCGs since they began operating in April 2013 and the challenges that they would be facing in the near future.

Jo made the following points on the progress of South Cheshire CCG:

- The CCG was making good progress with Connecting Care, which had similar themes to Eastern Cheshire Caring Together programme.
- The CCG had a lay member on the Board who was responsible for public engagement.
- The CCGs five year strategy and two year plan were near completion and would be available to look at soon.
- The CCG was meeting the challenge of working with less capacity and resources than the previous PCT.
- There had been more collaboration of commissioning with partners, including the Council, than ever before and this would continue in the future.

The challenges for the future faced by South Cheshire CCG included:

- Increasing the quality of services provided with fewer resources.
- The growing number of people living longer into old age and young people with disabilities surviving into adulthood increase the demand for services.
- Managing the growing complexity of health needs.

Matthew reiterated many of the points made by Jo as Eastern Cheshire had gone through similar structural and governance changes during the transition from the PCT. Much of the work of the CCG was focused on the Caring Together programme which the Committee had considered in the previous item. The challenges Eastern Cheshire CCG faced in the future included:

- Difficulties caused by the funding formulae and financial challenge of £50M deficit
- Geographical influences, i.e. proximity to Greater Manchester and the requirement to build relationships with them to serve patients effectively

Kirsty McBride, NHS England, sent apologies for not being able to attend the meeting but had sent a note to update the Committee on NHS England's future challenges. NHS England was prioritising its specialised commissioning; its aim was to create more national specialised centres for treatments that were rarely carried out on a local basis. It was hoped that outcomes for patients with rare conditions or specialised needs would be improved if there were fewer centres providing services more often to more people.

RESOLVED – That the updates be noted.

191 **WORK PROGRAMME**

The Committee considered its new work programme document and developed ideas for possible future items. The following topics were suggested:

- Winter planning
- Caring Together
- CCG two year plans
- Travel plans (patients, family and friends travelling to health services)

- NHS Trust Quality Accounts
- Shifting services from hospitals to communities
- Quality of health and care services
- Integration and connecting budgets for health and social care
- Early Intervention and Prevention of illness and deterioration

RESOLVED – That the work programme be updated to include the items discussed.

The meeting commenced at 10.00 am and concluded at 11.50 am

Councillor H Gaddum (Chairman)